Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

09/785,793

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY	
TO	OTAL CLAIMS							RATE	FEE	7	RATE	FEE
FC)R		NUMBER	FILED	NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TC	TAL CHARGE	ABLE CLAIMS	36 mir	nus 20=	*	16		X\$ 9=		OR	X\$18=	288 -
INE	EPENDENT C	LAIMS	/	inus 3 =	*	8		X43=		OR	X86=	1040-
ΜL	ILTIPLE DEPEN	NDENT CLAIM P	RESENT	ESENT				.145-		1	>70 + 29 0=	<u> </u>
* If the difference in column 1 is less than zero, enter "0" in column 2								+145= TOTAL	ļ	OR	TOTAL	270-
CLAIMS AS AMENDED - PART II								IOIAL	<u>. </u>	JOH	OTHER	THAN
	3.26.04	(Column 1)		(Colun	nn 2) (Column 3)		SMAL		ENTITY	OR	SMALL ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	· 20	Minus	** 2	36	= 0		X\$ 9=	į	OR	X\$18=	
AME	Independent	* 2	Minus	*** /	1	=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+145=	,	OR	+290=		
							L	TOTAL ADDIT. FEE			TOTAL ADDIT, FEE	0
42800 (Column 1) (Column 2) (Column 3)								, ,		. ,	10011. I ELI	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 20	Minus	** 5	36	= 0		X\$ 9=		OR	X\$18=	
	Independent	* 2	Minus	*** /	CI ANA	= 0		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						' [+145=		OR	+290=	
							L	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT, FEE	D
	7.29.04 (Column 1) (Column 2) (Column 3)											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER USLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 20	Minus	* 3	6	= D		X\$ 9=		OR	X\$18=	
	Independent	* 2	Minus	***		=	r	X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-					
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							+145=		OR [+290= TOTAL	0
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

Page 2

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CLAIMS AS FILED - PART I (Column 1)						ımn 2)		SMALL ENTITY TYPE			OTHER THAN R SMALL ENTITY	
TC	TAL CLAIMS]	RATE	FEE]	RATE	FEE
FC)R		NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TC	TAL CHARGE	ABLE CLAIMS	minus 20=		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS minus 3 =					*			X43=		OR	X86=	-
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column						column 2	J	TOTAL		OR	TOTAL	
						(Column 3)	<u> </u>	SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A	·	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 20	Minus	** 3(<u>e</u>	= 0		X\$ 9=	_	OR	X\$18=	
	Independent	* 2 ENTATION OF MU	Minus	***	CL AIM	=	} [X43=		OR	X86=	
	FINST PRESE	INTATION OF MIC	DETIFIE DEF	ENDENT	CLATIVI		J	+145=	,	OR	+290=	
							L	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	0
-	2.7.05	(Column 1)		(Colum		(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE
	Total	. 22	Minus	** 2	36 <u></u>	= 0		X\$ 9=		OR	X\$18=	
AME	Independent	* 2 NTATION OF MU	Minus	###	CLAIM	= 0	1[X43=		OR	X86=	
	THOTTHEOL	TOTAL OF THE	·	ZITOLITI	0.5 (11)		١	+145=		OR	+290=	
						•	A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	0
		(Column 1)		(Colum		(Column 3)	٠			_		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	IER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE
	Total	*	Minus	##		=		X\$ 9=		OR	X\$18=	_
	Independent	*	Minus	***	0			X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+145=		OR	+290=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20. *If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												